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SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

- 1. Please report correctly the details of the accident to speed up the claims process.
- 2. This Form must be completed by the Policyholder and/or the Authorised Driver.
- 3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or witholding of material facts may allow insurance companies to repudiate policy liability.
- 4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
- 5. Any false reporting may be referred to the Police for investigation.
- 6. This report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will, for a fee, be made available upon application by interested parties.
- 7. By the lodgement of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available

	ACCIDENT STATEMENT
Date Of Report	08/04/2019 20:18
Date Of Accident	08/04/2019 15:20
Exact Location Of Accident	ANG MO KIO AVENUE 5 TOWARDS CTE CENTRE LANE
Country/State of Loss	SINGAPORE
Day of the second secon	ETAILS OF OWN VEHICLE
/ehicle Registration Number	SJF2788Y
Insured/Policyholder	
Name Of Registered Owner	THOMAS MICHAEL GEEKIE
NRIC No	S2204117G
Email Address	MAHITAGEEKIE@GMAIL.COM
Mobile Phone No	(LOCAL) +65-93634320
Alternative Phone No	OTHERS-93634370
Vehicle Particulars	
Manufacturer	BMW
Model	3201
Exact Purpose for which vehicle was being used at time of accident	DRIVING HOME
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	REPORTING ONLY
Vehicle Category	PRIVATE CAR
Insurance Company	
Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE

Fleet Policy NO

Policy Number 5099950905

Cover Note Number

Driver

 Name of Driver
 MAHITA GEEKIE

 NRIC No
 \$1562274A

 Date Of Birth
 23/10/1962

 Occupation
 INDOOR

 Date Of Driving Pass
 04/06/1990

Driving Experience 28 YEARS AND 10 MONTHS

Gender FEMALE

Mobile Number (LOCAL) +65-93634320

Fax Number

Contact Number OTHERS-93634370

EMail Address MAHITAGEEKIE@GMAIL.COM

Address

48 CORONATION ROAD WEST

#07-02

Postcode

269263

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured

SPOUSE

Vehicle Registration Number of Driver's Own

Vehicle

Insurance Company of Driver's Own Vehicle

General Information of the Accident

Type Of Accident

COLLISION - HEAD TO REAR

Weather Conditions

CLEAR

Road Surface

DRY

Other Information

Was any foreign vehicle involved in this accident?

NO

Number of vehicles (including own vehicle)

involved in the accident

2

Was any body injured in the Accident?

NO

Was any injured conveyed to hospital by

ambulance?

NO

Was any other material or property damaged?

YES

I have been approached by unknown person(s) soliciting/offering accident claims assistance.

NO

Number of Passengers (Including Driver)

1

Details of Police Action

Was the accident reported to the police?

NO

If Yes, Please state which Police Station

Was notice of intended Prosecution given?

NO

If Yes, against whom?

Circumstances of Accident

PLEASE REFER TO SKETCH PLAN

Attachment(s)

Are accident photos available for attachment?

YES

Was there any video captured by Car Camera?

NO

Was there any audio recorded?

NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

FBB9076M

Vehicle Make/Model/Colour

Details Of Properties

MOTORCYCLE

Vehicle Category Name of Driver

MUHAMMAD IRSYAD BIN JUANDA

NRIC/Passport Number

S9903420C

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

SKETCH PLAN

IMPORTANT NOTICE

- Please report correctly the details of the accident to speed up the claims process.
- 2. This Form must be completed by the Policyholder and/or the Authorised Driver.
- 3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy liability.
- 4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
- 5. Any false reporting may be referred to the Police for investigation.
- 6. The report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will for a fee be made available upon application by interested parties.
- 7. By the lodgment of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.
- 8. Consent under the Personal Data Protection Act (PDPA)

I understand, acknowledge, agree and consent that:

- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "Personal Information") and disclose and transfer such Personal Information to all insurer(s) who have insured vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident shall be collectively referred to as the "Insurers"), the Insurers' lawyers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s) of:
 - (i) processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims;
 - (ii) investigating the accident and/or my claims;
 - (iii) carrying out and/or dealing with my instructions or responding to any enquiries by me;
 - (iv) administering my claims (including the mailing of correspondence, statements, invoices, reports or notices to me, which could involve disclosure of certain personal data about me to bring about delivery of the same as well as on the external cover of envelopes/mail packages); and/or
 - (v) complying with applicable law in administering, processing, handling and/or dealing with my claims.(collectively the "Purposes")
- (b) all insurer(s) who have insured vehicle(s) involved in this accident and the Insurers' lawyers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and
- my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents(including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.
- my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
 - (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
 - (ii) for complying with requirements under any regulations, laws or court orders.

Policyholder's Signature

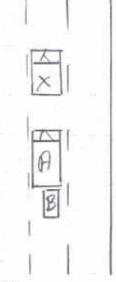
Driver's Signature

(If driver is not the policyholder)

Date & Time:

Beporting Centre Pg

A) SJF 2278 Y



ALONG BUG MOKED ANAS

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Driving along Ang No Kio Are. 5. car in front
of me slowed down near traffic lights. 50 9
also slowed down. Then 9 felt my car more
forward + heard a loud bong at the same time.
I looked in the rear view minor and saw motorcycles
fall of his notobike. I stopped the car got out to
help fin. He could not explain why or how he
baned into me even though a was soin quito slowly
due to slow-morn droppic. I was going quite slowly
J 00

DECLARATION

I/We declare the foregoing particulars are true in every respect.

Policyholder's Signature

Date & Time:

8/4/19 1650

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personfiel's S

Name:

NRIC/FIN No.:

top No.	5099950905	Vehicle: No	33137881		GST Registration No.		
rhoate No.							
yhidder Name	FHOMAS MICHAEL GEEKIE				Policyholder NHGG	527041370	
out Code	PROVATE CAR INSURANCE	Cover Type	SING CLASSIC		Loading		
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Claim Handling(accident reporting Claim Task)

	Listoaded By/Date	Folder Date	9	se name	P Buox	Accom
→ Video List		NAME OF THE PARTY AND PARTY.				
777 MME	NAC_HUNIT_MERAH_B09676(NAT \$ (BUNIT MENAH)	TUNAL ASSESSMENT CENTRE SERVICE OF OV APP 2019 11:01	NRIC/ Driving License	Normal	NRIC/ Driving License 2019-4-9	
43	WAC_BURIT_MERAH_800676(NA) S (BURIT MERAH)	TIONAL ASSESSMENT CENTRE SERVICE I ON SW Apr 2019 11:05	SAS	Nurmed	SAS 2019-4-9	
	NAC_BUKTY_MERAH_800676(NAT S (BUMTY MERAH)	TUNAL ASSESSMENT CENTRE SERVICE Jun 09 Apr 3019 11/01	Photos	Naversal	Phiston 2018-4-9	
6	NAC_BURIT_MERAH_SCOR76(NAT S (BURIT MERAH)	TONAL ASSESSMENT CENTRE SERVICE I ON DE ABY 2029 12:01	Photos	horroat	Photos 2018-4-9	
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6	S-(BUNTT MERAN)	TIONAL ASSESSMENT CENTRE SERVICE) on 19 Apr 2019 11:02	Photos	Normal	Phone 2019-4-9	
1	NAC_BOKIT_MERAH_800676(NA: \$ (BUKIT MERAH)	TIONAL ASSESSMENT CENTRE SERVICE on 09 Apr 2019 11:02	Photos	Normal	Photos 2019-4-9	
3	NAC_BUKIT_MERAN_800576 NA 5 (BUKIT MERAN)	TIGNAL ASSESSMENT CENTRE SERVICE) on 08 Apr 2019 11:02	Philips	Record	Phonos 2015-4-8	
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Display in New Winstow Scan and uploading

ACCIDENT STATEMENT

ACC	DENT DATE: 8 4 19	(DD/MM/YYY), TIME:(_ 3	: 20)(HR:MM)
LOCA	TION: Ang Mo Kio A	ive S, Howards	CTE centre lan
1.	DETAILS OF VEHICLE	2788Y	
¥2	하면 얼마나 아이는 그리는 이 나를 하는 것이 되었다. 그리는 사람들은 사람들이 되었다.	19 50905	A DTV SIDE OTHERT
	a)MAKE & MODEL:		
	.g) VEHICLE CATEGORY: (PRIVATE h) PURPOSE OF USING AT ACCID	COMMERCIAL / MOTOR	CYCLE)
5224 5224	IF NO, PLEASE STATE THIRD PAR	UP OWN INSURANCE (YESA	(D)
2.,	A) NAME: Thomas (N)		ALE FEMALE 4320
50 ES 6	CIADDRESS: 48 Coma		- O7-OZ
His of passongs.	CONTINUE TO 3.d IF DRIVER ALL	Manifest	
(Including diviver)	DINAME: Mahita Ger DINRIC/FIN/PASSPORT: \$ 156: DIADDRESS: 40 Com	CONTACT	ALE (FEMALS) : 93634370 + 07-02
	*d) DATE OF BIRTH: (23/10)	5.269263	207-01
ű.	e)OCCUPATION: (INDOOR / OUT f)DATE OF DRIVING PASS WAS DRIVER AN EMPLOYEE OF	4/6/90	
	IF NO, RELATIONSHIP OF THE	DRIVER WITH INSURED:	
6.	WAS ANYBODY INJURED (YES /	OTHERS	
0.00	IF YES, PLEASE STATE WHICH PO THIRD PARTY VEHICLE	LICE STATION:	49 20
Mo of passenger (Including driver)	a) VEHICLE NUMBER: FRB 9 b) DRIVER'S NAME: MUNAMM c) NRIC/FIN/PASSPORT: 18	076 M MODEL	anda
9.	THIRD PARTY VEHICLE		
the of passanger (Including driver)	d) VEHICLE NUMBER:		<u> </u>
ر_ي	II INRIG/FIN/F ASSPORT	CONTACT	Adda and and and and and and and and and
	(6)		The second secon

email = mahitaseekie@gmail.com

REPUBLIC OF SINGAPORE IDENTITY CARD NO. \$1562274A



MAHITA GEEKIE



INDIAN 23-10-1962

Country/Place of birth SINGAPORE





YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSIES)

EFFECTIVE DATE

Motor cars with unladen weight =< 3000kg with =< 7 04 Jun 1990 passengers, exclusive of driver; and other motor vehicles with unladen weight =< 2500kg Class 3

Licence No:51552274A

NP 428A

5984432



23-07-2018

48 CORONATION ROAD WEST

#07-02 SINGAPORE 269263



Certificate of Insurance

MOTOR VEHICLES (THIRD PARTY RISKS AND	COMPENSATION) ACT (CHAPTER 100)
MOTOR VEHICLES (THIRD PARTY RISKS AND	COMPENSATION) PLUES 1000
ROAD TRANSPORT ACT, 1987 (MALAYSIA)	45 M LIVSA (1014) NOLES, 1960

MOTOR VEHICLES (THIRD PARTY RISKS) RULES, 1959 (MALAYSIA)

Certificate Number: 5099950905

Cover : drivo CLASSIC

1. Index mark and Registration Number of Vehicle

:: SJF2788Y

Chassis Number

: WBAVG76060NL63095

2. Name of Policyholder

: THOMAS MICHAEL GEEKIE

3. Effective Date of Insurance

: 26 May 2018

4. Expiry Date of Insurance

: 25 May 2019

5. Persons or Classes of Persons entitled to drive#

(a) The Policyholder.

(b) Any other person who is driving on the Policyholder's order or with his/her permission. Provided that the person driving is permitted in accordance with the licensing or other laws or regulations to drive the Motor Vehicle or has been so permitted and is not disqualified by order of a Court of Law or by reason of any enactment or regulation in that behalf from driving the Motor Vehicle.

6. Limitations as to Use#

(a) Use for social domestic and pleasure purposes and in connection with the Policyholder's business or profession.

This Policy does not cover

EXCESS (SECTION 1)

- (a) Use for hire or reward.
- (b) Use for racing, pace-making, reliability trial or speed-testing.
- (c) Use for the carriage of goods (other than samples) in connection with any trade or business.
- (d) Use for any purpose in connection with the Motor Trade.
 - # Limitations rendered inoperative by Section 8 of the Motor Vehicle (Third Party Risks and Compensation) Act (Chapter 189) and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings.

\$5600 EXCESS (SECTION 2) : N/A WINDSCREEN EXCESS 5\$100 ADDITIONAL EXCESS : N/A UNNAMED DRIVER EXCESS : PLEASE REFER OVERLEAF REPAIR AT OWNER'S PREFERRED WORKSHOP : NO INSURE WITH COE : YES NCD PROTECTION : YES (FREE) TRANSPORT ALLOWANCE : NO EXCESS WAIVER PRIMARY DRIVER : THOMAS MICHAEL GEEKIE NAMED DRIVER (1) : MAHITA GEEKIE NAMED DRIVER (2) : N/A HIRE PURCHASE COMPANY : N/A SUM INSURED : MARKET VALUE OF INSURED VEHICLE AT TIME OF LOSS

I/We hereby Certify that the Policy to which this Certificate relates is issued in accordance with the provisions of the Motor Vehicles (Third Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia)

: SIME DARBY INSURANCE BROKERS (SINGAPORE) PTE LTD (00000690067)

Date of Issue

: 07 May 2018 12:54 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED

Countersigned By:

Authorised Officer

Chief Executive